| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | 1 | Application or Docket Number | | | |
|--|--|--|--------------------------------------|-------------------------------------|-----------------------|-------------------------------|--------------------|--|------------------------------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column | | | | | | (Column 2) | SMALL I | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY | | | | |
| U.S. NATIONAL STAGE FEES | | | | | | | RATE | FEE | | RATE | FEE | |
| BASIC FEE | | | | | | | BASIC FEE | | OF | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | | EXAM. FEE | | 7 | EXAM. FEE | ZW | |
| SEARCH FEE | | | • | | | | SEARCH FI | EE | _ | SEARCH FEE | 400 | |
| FEE FOR EXTRA SPEC. PGS. | | | n | ninus 100 = | | / 50 = | X \$ 125 | = | 1 | X \$ 250 = | 1 | |
| TOTAL CHARGEABLE CLAIMS | | | 20 | 20minus 20 = * | | | | = | OR | | | |
| INDEPENDENT CLAIMS | | | 1 4 | 4 minus 3 = * / | | | X \$ 100 | <u> </u> | OR | | 200 | |
| MULTIPLE DEPENDENT CLAIM PRE | | | RESENT | 1 | | | + \$ 180 | _ | OR | | | |
| * If | the difference | e in column 1 is | less than z | less than zero, enter "0" in column | | | TOTAL | | OR | L | 1100 | |
| | <u> </u> | CLAIMS AS (Column 1) CLAIMS REMAINING | AMENDE | | mn 2) EST | ·· (Golumn 3) | | ENTITY ADDI | _ | OTHER SMALL E | ADDI- | |
| AMENDMENT A | | AFTER AMENDMENT | | PREVIO PAID I | DUSLY | EXTRA | RATE | TIONA FEE | ŗ | RATE | TIONAL FEE | |
| | Total | * | Minus | ** | | = | X \$ 25 : | = - | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | X \$ 100 | = | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 | | OR | + \$ 360 = | | |
| | | TOTAL ADD | IT. | OR | TOTAL ADDIT. FFF | | | | | | | |
| | | (Column 1) | | (Colum | | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONA FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | X \$ 25 = | : | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | X \$ 100 | = | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 : | = ' | OR | + \$ 360 = | | |
| | | | | | | | TOTAL ADD FFF | ΙТ. | OR | TOTAL ADDIT. FFF | | |
| *** | If the "Highest Nu If the "Highest Nu | imn 1 is less than th imber Previously Pa mber Previously Pai nber Previously Pai | iid For" IN THIS iid For" IN THIS | S SPACE is less S SPACE is less | than '20 than '3'. |)', enter "20". enter "3". | in the appropriate | box in colum | n 1. | | | |